



Summer Food Service Program

CHILD DAILY MEAL COUNT FORM - ENROLLED SITES AND CAMPS

Site Name _____ Date From _____ Date To _____

Key: B = Breakfast; AM = AM Snack; L = Lunch; PM = PM Snack; S = Supper

[illegible]

Number of children enrolled_____ Number of children approved for this site_____ Number of children eligible for free meals_____

I certify that the above counts are true and correct. Authorized Signature _____ Date _____